OIPE	
MAR 1 5 2002 Please type a plus ygn	(+) inside this box \longrightarrow $+$

03-18-02

PTO/SB/27(08-00)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE duction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperunds Redu

TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/674,624	AE ME	2
Filing Date	November 3, 2000	R 160	7007
First Named Inventor	A. Fujishima	0/2900	70
Group Art Unit	1625	8	
Examiner Name	J. Fan		
Attorney Docket Number	2635 US0P		

			ENCLOSURES (check	all that apply)			
Fee Transmittal For	m ·		Assignment Papers (for an Application)	After Allowance Communication to Group			
Fee Attached	d		Drawing(s)	Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply	y		Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final			Petition	Proprietary Information			
Affidavits/de	eclaration(s)		Petition to Convert to a Provisional Application	Status Letter			
Extension of Time F	Request		Power of Attorney, Revocation Change of Correspondence Address	Other Enclosure(s) (please identify below):			
Express Abandonm	nent Request		Terminal Disclaimer	Return Postcard. Form PTO 1449			
			Request for Refund	Cited References (3)			
Information Disclos			CD, Number of CD(s)				
Certified Copy of Priority Document(s) Remarks The Commissioner is hereby authorized to							
	Response to Missing Parts/ Incomplete Application Response to Missing Parts/ Charge any additional fees which may be						
Response to Missing Parts Under 37 CFR 1.52 or 1.53 required, or credit any overpayment to Deposit Account 500799.							
	SIGNATU	RE OF	APPLICANT, ATTORNEY, OR	AGENT			
Firm or Elaine M. Ramesh, Ph.D., JD, Reg. No. 43,032							
Signature Elaine M Ramesh							
Date 3/15/02							
CERTIFICATE OF MAILING							
I hereby certify that this commail in an envelope address	respondence is being sed to: Commissioner	deposite for Pate	ed with the United States Postal Servents, Washington, DC 20231 on this of	vice with sufficient postage as first class date:			
Typed or printed name							
Signature			Dat	e			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Under the	And the second section of 1995	. no persons are requir	ed to re	espond	U.S. to a c	Patent	and Trade	roved for use through 10/31/20 mark Office; U.S. DEPARTME ation unless it displays a valid 0	02. OM	COMMER	032 RCE
								plete if Known	오		孝
F	EE TRANS	WILLIA	┕╽	Appli	catio	n Num	ber 09	9/674,624	$\overline{\Omega}$	AR R	T
	for FY 2	002		Filing	Date	9	N	ovember 3, 2000	Z		Ч
				First	Nam	ed Inv	entor A.	. Fujishima	Ξ	20	Π
	Patent fees are subject to an			Exan	niner	Name	J.	Fan		2	Z
Applican	nt claims small entity status. S	ee 37 CFR 1.27		Grou	p Art	Unit	16	625	600	2007	d
TOTAL AN	NOUNT OF PAYMENT	(\$) 180.00		Attor	ney [Oocket	No. 26	635 US0P	28		7
METH	OD OF PAYMENT (check a	all that apply)				FI	E CALC	CULATION (continued)	8		\square
	Credit card Money Order	Other None		DDIT							
Deposit Account	500799		Fee Cod	Fee e (\$)	Fee Cod	Fee e (\$)	_	Fee Description	Г	Fee Paid	4
Number Deposit Account Name	Takeda Chemical Indu	stries Ltd.	105 127	130 50	205 227	65 25	•	- late filing fee or oath - late provisional filing fee or			
_	ioner is authorized to: (check eles) indicated below Cred	that apply) it any overpayments	139	130	139	130	·	sh specification			$\exists I$
_	additional fee(s) during the pend (s) indicated below, except for the		112	2,520 920*	112	2,520 920*	•	a request for ex parte reexamin g publication of SIR prior to action	ation_		
to the above ide	entified deposit account.		113	1 8/0*	112	1 840*	Peguactin	a publication of SID after	- 1		1

Deposit Account:	Laige	Citity	Silia	ii Entit	<u>y</u>	
Deposit Account 500799		le (\$)		le (\$)	ree Description	Fee Paid
Number Deposit	105	130	205	65	Surcharge - late filing fee or oath	
Account Name Takeda Chemical Industries Ltd.	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	139	130	139	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	147	2,520	147	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	n 112	920*		920*	Requesting publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee	'''	320	' ' 2	520	Examiner action	
to the above identified deposit account.	113	1,840*	113	1,840*	Requesting publication of SIR after	
FEE CALCULATION		440	245		Examiner action	
1. BASIC FILING FEE	115	110	215	55	Extension for reply within first month	
Large Entity Small Entity	116	400	216	200	Extension for reply within second month	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117	920	1	460	Extension for reply within third month	<u> </u>
101 740 201 370 Utility filing fee	118	1,440	218	720	Extension for reply within fourth month	
106 330 206 165 Design filing fee	128	1,960	228	980	Extension for reply within fifth month	
107 510 207 255 Plant filing fee	119	320	219	160	Notice of Appeal	
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee	121	280	221	140	Request for oral hearing	
	138	1,510	138	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	140	110	240	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUI	141	1,280	241	640	Petition to revive - unintentional	
Fee from Extra Claims below Fee Paid	142	1,280	242	640	Utility issue fee (or reissue)	
Total Claims -20** = 0 X 18.00 = 0	143	460	243	230	Design issue fee	
Independent Claims - 3** = 0 X 84.00 = 0	144	620	244	310	Plant issue fee	
Multiple Dependent 280.00 =	122	130	122	130	Petitions to the Commissioner	
	123	50	123	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	126	180	126	180	Submission of Information Disclosure Stmt	180.00
Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment per	
103 18 203 9 Claims in excess of 20	1 ~	70	"	70	property (times number of properties)	
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection	
104 280 204 140 Multiple dependent claim, if not paid	1				(37 ČFR § 1.129(a))	
109 84 209 42 ** Reissue independent claims over original patent	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)	
and over original patent	169	900	169	900	Request for expedited examination	
SUBTOTAL (2) (\$)	Othe	Other fee (specify)				
	, Pa	luced h	v Bee	ic Ellina	Fee Paid SUBTOTAL (3) (\$) 18	0.00
**or number previously paid, if greater; For Reissues, see above	1,00	.3000 0	, Jas		3.55.55 GODIOIAE (0) (117	

SUBMITTED BY					Complete (ii	applicable)
Name (Print/Type)	Elaine M. Ramesh		Registration No. (Attorney/Agent)	43,032	Telephone	(847) 383-3391
Signature	Elaine m	Lames	{		Date	3/15/02

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Sympus Mail #EL 916 492 92 5 U.S.